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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Hegar, Mary Jennings, MJ, ,								
	(b) Address (number and street) PO Box 7156	☐ Check if address changed				2. Candidate's FEC Identification Number S0TX00233			
	(c) City, State, and ZIP Code					3. Is This No	ew Amended		
	Round Rock		T	X 7868	33	Statement X (N) OR (A)		
4.	Party Affiliation	5. Office Soug	ht		6. State & Distr	rict of Candidate			
	DEMOCRATIC PARTY	Senate			TX	00			
	DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE								
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2020 (year of election)								
	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
	(a) Name of Committee (in full) MJ FOR TEXAS								
	(b) Address (number and street) PO BOX 7156								
	(c) City, State, and ZIP Code								
	ROUND ROCK				TX	78683			
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)									
8.	I hereby authorize the following nam candidacy.	ied committee,	which is NO	ı my princip	ai campaign com	nmittee, to receive and exp	pend funds on benait of my		
	NOTE: This designation should be filed with the principal campaign committee.								
	(a) Name of Committee (in full) Serve America Victor	ory Fund							
	(b) Address (number and street) PO Box 2013								
	(c) City, State, and ZIP Code								
	Salem				MA	01970			
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.									
Si	gnature of Candidate					Date			
Н	egar, Mary Jennings, MJ, ,			[Elec	tronically Filed]	04/24/2019			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.									

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

8.	candidacy. NOTE : This designation should be filed with the principal campaign committee, to receive and expend funds on behalf of my								
	(a) Name of Committee (in full) MA House Victory Fund (b) Address (number and street) 918 Pennsylvania Ave SE								
	(c) City, State, and ZIP Code								
	Washington DC	20003							
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.								
	(a) Name of Committee (in full)								
	MJ Victory Fund								
	(b) Address (number and street) PO Box 7156								
	(c) City, State, and ZIP Code								
	Round Rock TX	78683							
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full)									
	(b) Address (number and street)								
	(c) City, State, and ZIP Code								
8.	8. I hereby authorize the following named committee, which is NOT my principal campaign concandidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full)	mmittee, to receive and expend funds on behalf of my							
	(b) Address (number and street)								
	(c) City, State, and ZIP Code								